



The Examiner

Naval Hospital, Twentynine Palms

"Serving with Pride and Professionalism"

Volume 3, No. 9

September 1995

Spotlight On...

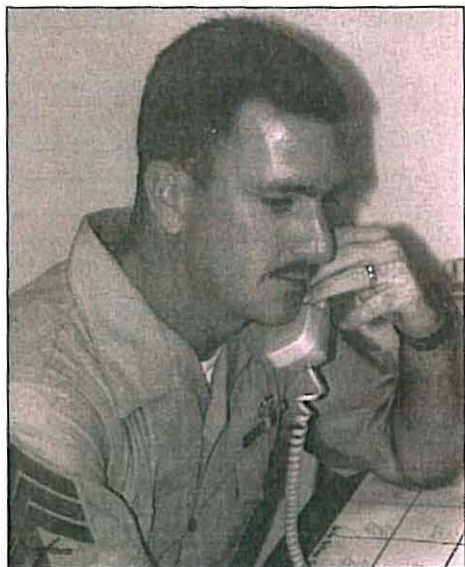
Marines important in Patient Admin

By Dan Barber
Public Affairs Officer

If you have ever wondered how active duty patients receiving medical care in a civilian or military hospital are tracked by the Navy... well the Marines do the job. At Naval Hospital Twentynine Palms that job is just one small part of the Marine Liaisons duties.

"If it wasn't for our Marines in the Marine Liaison Office our job here in

Continued on page 6.



Sergeant Roy Whitener, of the Marine Liaison office in Patient Administration busy at work.

OJT program enhances careers at Naval Hospital Twentynine Palms

By Dan Barber
Public Affairs Officer

HM3 Robert Barton of the Radiology Department can attest to the success of the On The Job (OJT) program at Naval Hospital Twentynine Palms... he completed the OJT program here and he just graduated from the year long Advanced Xray Technician school and returned to the hospital.

"The school will really help me in advancing my career," said Barton. "The program here at the hospital really helps set us up for success in school and in our field of medicine," he added.

Naval Hospital Twentynine Palms has certified OJT programs not only in the Radiology Department but the Optometry, Pharmacy and Physical Therapy Departments as well. The hospital here is only one of four in the Navy to have a certified OJT program for Corpsman in Radiology.

According to Commander William "Bill" Harris, Director, Ancillary Services at Naval Hospital Twentynine Palms, "Not just anybody can get into one of our OJT programs. Corpsmen wishing to train in one of the OJT programs must submit a request chit and generally meet three criteria." Those criteria are: Be interested in pursuing the requested field and meeting the basic requirements for the advanced school; have a good record and excellent evaluations while at Naval Hospital Twentynine Palms. CDR Harris emphasizes the OJT program is a reward for hard work. The final criteria is the



HN Jon Turk succeeds in OJT program.

individual must have at least one year remaining on their tour of duty at the hospital. Then individuals will be screened to ensure they meet the requirements for advanced schools before they will be allowed to participate.

One successful applicant in the program is HN Jon Turk. "The experience we get from on hands training will prepare us to take better X-rays than the basic X-ray technicians," Turk said. HN Turk graduated from Ocean Shores H.S. in Oceanside, California in 1988. He graduated from Boot Camp in Orlando, Florida where he was awarded the "Ironman." Initially HN Turk was a

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Where is our hospital going

See page 2

Pharmacy adds new machine

See page 4

Here's to your Health

See page 5

The Hart of the Matter! Where is our hospital going

Naval Hospital Twentynine Palms is going towards greater participatory management. To carry out our strategic plan, we need to enlist the brain power and diverse input of as many of our people as we can. We have decided to do this through the use of QMBs (Quality Management Boards). Although still in the formative stages, we intend to align these QMBs with the Hospital's strategic goals. Strategic goals/QMBs are listed at the end of this article.

What is a QMB? "QMB" is a TQL term for a collaborative team of process owners assembled for the purpose of improving a way of doing things or achieving something--improving the process or improving the system. For example, one of our QMBs in early development is the "Environment of Care QMB." The purpose of the Environment of Care QMB is to "design and implement a strategic plan for the continuous improvement of a functional and safe environment for our patients." Wow! How's that for nebulous! Well, yes it is. Such broad charters will be further defined and narrowed as we begin to get our arms around just what the environment of care is and develop and define opportunities for improvement. The point is that with this QMB and others, we want to approach problems or improvements from a process perspective, i.e. from the patient's perspective. And for that we need many of you involved. Where previously most environ-



Captain S.E. Hart

ment of care issues were left to the safety officer to deal with, we now will have nurses, doctors, med repair, safety, materials management, facilities, housekeeping, and possibly others working together on a problem. Who will benefit from such collaborative approach? Hopefully we all will and most importantly, the patient.

The Commanding Officer and the Board of Director's believe that the best decision on how a process can be improved is made by the people who deal with the process every day. We want everyone in the hospital to feel empowered to make suggestions and give input and in many cases to go ahead and make changes to make something better. Since none of us work in isolation, we want the genesis of change to come from teamwork. The formation of goal-oriented QMBs are an example of such teams. We want each of you to become part of the

management of the hospital.

Once we have the QMBs established, and the QMBs have spawned PATs (Process Action Teams), nearly everyone in the hospital will be somehow involved in helping make management decisions.

We are still finding our way in this, but believe that empowered decision-making by the people who know the processes best is the best way to make our hospital function better for the patient and for the staff. You are encouraged to participate in a QMB or PAT.

Listed below are the currently proposed QMBs and their Chairpersons. If you are interested in serving on one of these QMBs or their associated PATs, give the Chair a call and volunteer. Most of the QMB members have been selected, but there will be turnover and opportunities exist for assignment on a PAT that will be forming. Thank you in advance for your willingness to help out. Together we will realize our hospital's vision of being the most desirable place to work and live in Navy Medicine!

The **EXAMINER** Newsletter is an authorized publication of the U.S. Naval Hospital, Twentynine Palms, CA 92278-8250. The views expressed in this publication are not necessarily those of the Department of the Navy.

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The **EXAMINER** welcomes your comments and suggestions concerning the newsletter. All comments should be forwarded to the Public Affairs Office by the 15th of each month. The Public Affairs Office telephone number is (619) 830-2362.

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The **EXAMINER** staff would like to thank all those who participated in this edition.

The following QMBs have been formed and Chairs identified:

<u>QMB</u>	<u>Chair</u>	<u>Telephone</u>
Environment of Care	LCDR M. Clifford, NC	2071
Quality of Life	LCDR R. Davis, NC	2311
Patient Care	ENS P. Kearney, NC	2621
Management of Information ..	LTJG K. Bingham, MSC	2446
Operational Readiness	CDR S. Knutson, NC	2647
Customer Delight	ENS M. Batschi, MSC	2574
Human Resources	HMCM C. Howard	2424

Chaplain's Corner

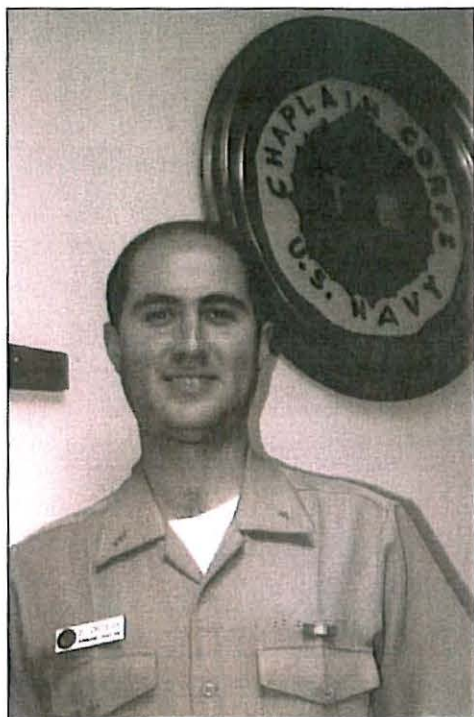
For better or for worse

By Ensign Samuel Ortega
Naval Hospital Chaplain

This month I would like to make a few comments on a crime that is increasing everyday in families and couples all across the United States. The crime is Domestic Violence. It affects every race, religion, and economical status. According to statistics, every 15 seconds, a woman is battered. An estimated two to four million American women are physically abused each year. And every year, domestic violence results in almost 100,000 days of hospitalizations, almost 30,000 emergency department visits, and almost 40,000 visits to a physician.

Why does domestic violence exist when couples vow at the altar to love each other for better or for worse? Back when Adam and Eve were living in the Garden of Eden they never expected to have problems. They thought that all would be fine throughout eternity. But as we know Satan had a different plan for them, if they choose it. Because of their own selfishness they fell into temptation and sin spread like wildfire. Sin can be demonstrated in many different fashions. One of these is violence, domestic violence. Therefore, domestic violence occurs because man fails to have a personal relationship with God. The Apostle Paul wrote in Galatians 5:22,23; "But the fruit of the Spirit is love, joy, peace, longsuffering, gentleness, goodness, faith, meekness, temperance: against such there is no law." When couples are filled with God's Spirit, it is totally impossible for domestic violence to exist in their relationship. This statement may sound too ardent, but it's true. In God's celestial city there will not be a trace of violence. The disciple John wrote; "And God shall wipe away all tears from their eyes; and there shall be no more death, neither sorrow, nor crying, neither shall there be any more pain: for the former things are passed away." (Revelation 21:4) God is the answer for terminating domestic violence and many other crimes.

What can we do to help reduce the spread of domestic violence? There are several things that can be done. First, if you are a



Ensign Samuel Ortega

victim of abuse you should report it and seek help for yourself and the perpetrator. Chaplains and the Family Service Center are willing to assist you in getting some help. Their extension numbers are; Duty Chaplain #2190, Family Service Center #7206.

Second, seek a personal relationship with Jesus Christ. He is the only One that can bring peace and happiness into your home. Third, stop filling your mind with scenes of violence. You have heard the saying, 'Garbage in, garbage out.' Television is full of violent movies that don't glorify Jesus Christ. We need to use wisdom when deciding what to watch. Forth, remove any influence of violence from your child. Toy stores and cartoons bombard children with all types of violent and evil characters. After being exposed to a violent character, some children tend to model the character's actions with family members and friends. Finally, you can write to your congressman and encourage him/her to help preserve morality in our nation. Morality is going down rapidly, and it seems that very few are concerned.

We must take a stand against domestic violence. It's for our own protection and those that we love. By remaining silent on this issue, we are just as guilty as the perpetrator. God is willing to give strength and courage to those that want help, and for those who want to help others. As citizens of a country that was established under God, we must work hard to preserve peace in our homes and in society. Let us be united in putting an end to a crime that is destroying many relationships around the world.

Power of the future



Captain C.S. Chitwood, Commanding Officer of Naval Hospital Twentynine Palms and Major General L.M. Palm, Commanding General of MCAGCC cut the ribbon on the hospital's newest power supply.

Sure-Med brings state-of-the-art medication dispensing to Hospital

By Dan Barber
Public Affairs Officer

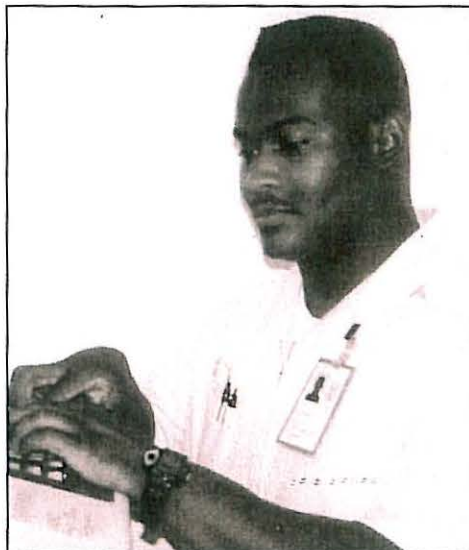
Naval Hospital Twentynine Palms is not only a leader in Navy Medicine for its high quality staff, but also for its state-of-the-art equipment. Some might say, "well you should have state-of-the-art equipment because the hospital is only two years old."

That latter statement may be true, but because of the rapidly changing world of technology, it takes high quality people to identify new equipment and new methods for doing business in a hospital. Naval Hospital Twentynine Palms is lucky to have one of those people on its staff... Lieutenant Philip Blaine, Head of the Pharmacy Department.

Since his arrival, Lt. Blaine has used his knowledge of the Prime Vendor program to save the hospital thousands of dollars and the Battalion Aid Stations a great deal of time and worry over their drug supplies. Now, he has brought another time saver to the hospital... a Baxter Sure-Med system. The Sure-Med system is a fully automated medication storage and dispensing system that offers unit-of-use dispensing. The system is particularly useful for narcotics, high-value medications and commonly used floor stock.

The system is controlled by a central computer located in the Pharmacy. The equipment itself is located between the Maternal Infant Ward and the Multiservice ward. The equipment consists of a locked, self-contained storage and dispensing cabinet. The cabinet is operated through a computer screen and keyboard and can be stocked by the Pharmacy with more than 200 different medications in any form... syringes, tablets capsules, liquids, vials and ampules and hold up to 40,000 individual unit doses.

To use the machine, a nurse can unlock the system by entering a personal password into the keyboard. The patient's name and needed medication is then entered. The unit will only dispense the unit of medication that was requested and automatically records the time of dispensing, the person requesting it and the patient's name. This system keeps a record of all drugs removed or returned. This



HN Fred Jackson of the Multiservice Ward prepares to dispense a patient's dose of medication from the Sure-Med cabinet.

eliminates the need for time consuming counts at change of shifts. Also the Pharmacy can, at any time, monitor dispensing activity on the ward and check inventory.

Plans are to expand the number of Sure-Med cabinets to three, placing one in Labor and Delivery and another in PACU.

Lt. Blaine stated that this type of state-of-the-art equipment could not be possible without the forward, positive thinking and support of the command.

Important TRICARE enrollment information

Aetna Government Health Plans announces that reenrollment is a requirement for current TRICARE Prime members to continue their membership in the Department of Defense (DoD) TRICARE Prime new uniform benefits for California and Hawaii. Oct. 1, is the effective start-up for the new program.

Reenrollment will continue through Sept. 30. Current TRICARE Prime members should have received information and instructions on the reenrollment process in the mail between July 17 and Aug. 1.

Reenrolling will mean acceptance of the following changes to TRICARE Prime:

- An annual enrollment fee of \$230 per individual or \$460 per family will be required for retirees, their families and survivors when they reenroll in TRICARE Prime. This fee may be paid either annually or in quarterly payments. However, reenrolled retirees and their family members, who now pay \$75 per day for an inpatient hospital stay in a civilian hospital, will pay only \$11 per day under the new uniform benefits.

- For routine doctor visits, the enrolled family member of an active duty E-4 and below will have a copayment of \$6. All other enrolled family members of both active duty and retirees will pay \$12.

Continued on page 7.

Meeting the big guy



HM3 Mauricio Salazar meets the Secretary of the Navy, the Honorable John Dalton, at the NEY awards banquet in Palm Springs.

Learning to cope with allergies every year

By Donna Templeton
Infection Control Nurse

Just when you thought we were through with spring irritants (ie. chicken pox), here comes another one, "allergies". Your very favorite, right? Allergies tend to be most prevalent during the spring, when the temperature rises and the plants begin to bloom and produce pollen. The winds pick up and distribute the pollen in every nook and cranny imaginable, including our "bodies"! We become miserable with itchy eyes, throats, and ears. Constant sneezing becomes a way of life for us. We learn to live with antihistamines, nose sprays, decongestants, and kleenex. We ask ourselves, "will it ever end?". Maybe not, but learning to cope may be the key....

We learn to live with antihistamines, nose sprays, decongestants, and kleenex. We ask ourselves, "will it ever end?". Maybe not, but learning to cope may be the key....

Allergic rhinitis (inflammation of the mucous membranes of the nose) is a reaction to airborne (inhaled) allergens. Depending on the allergen, the resulting rhinitis and conjunctivitis (inflammation of the mucous membranes of the eyes) may be seasonal (hay fever) or occur year round (perennial allergic rhinitis). Allergic rhinitis is the most common allergic reaction, affecting over 20 million Americans! It's mostly seen in young children and adolescents, but can occur in all age-groups.

Hay fever produces a hypersensitivity to an environmental allergen in a susceptible individual. And, like I mentioned earlier, it's usually induced by wind-borne pollens: in the spring by tree pollens (oak, elm, maple, alder, birch, olive, cottonwood); in summer by grass pollens (sheep sorrel, English plantain); and in the fall by weed pollens (ragweed). Occasionally, in the summer and fall, hay fever is induced by allergy to mold (fungal spores).

Perennial allergic rhinitis is usually caused by irritants such as dust mites, feather pillows, mold, cigarette smoke, upholstery, and animal danders. "Seasonal" pollen allergy (hay fever) may aggravate or increase symptoms of perennial rhinitis.

In hay fever, the key signs and symptoms are sneezing, profuse watery discharge from the nose, nasal congestion, and itching of the nose and eyes. Some people also complain of itching in the throat.

In perennial allergic rhinitis, conjunctivitis and other nasal effects are rare, but chronic (long duration) nasal congestion is common and often extends to the eustachian tube (ear canal), particularly in children. In both cases, dark circles may appear under the person's eyes ("allergic shiners"). The severity of the signs and symptoms may vary from year to year.

To distinguish between allergic rhinitis and the common cold, remember that the common cold produces a "beet red" look to the nose and nasal secretions containing exudate (matter). The common cold might also include a fever and sore throat.

To distinguish between allergic rhinitis and the common cold, remember that the common cold produces a "beet red" look to the nose and nasal secretions containing exudate (matter). The common cold might also include a fever and sore throat.

Treatment aims to control symptoms by eliminating the environmental allergen, if possible, and by drug therapy. Antihistamines are usually effective but may produce unwanted side effects such as dry mouth, sedation, nausea, dizziness, blurred vision, and nervousness. Some of the newer medicines on the market tend to have fewer side effects and are much less likely to cause sedation. You can reduce environmental exposure to airborne allergens in several ways: by sleeping with the windows closed, by avoiding the countryside during pollination

seasons, by using air conditioning to filter allergens and keep down moisture and dust, and by eliminating dust-collecting items, such as wool blankets, deep-pile carpets, and heavy drapes, from the home. Occasionally, in severe and resistant cases, you may consider drastic changes in life-style, such as relocation to a pollen-free area either seasonally or year round.

Although there is no-known cure for this frustrating "irritant", using common sense and seeing your physician (when needed) will go a long way in helping to control it. Remember, you're not alone, 19 million others are out there "suffering" just like you!!

Diabetes Classes Continue at Hospital

As part of its Health and Wellness program, Naval Hospital Twentynine Palms is offering on-going Diabetes classes and group meetings (They call themselves the "SUGAR-less BABIES").

If you have diabetes, live with someone with diabetes, love someone with diabetes, or would just like to learn more... you're invited.

Classes meet every Wednesday at 6 p.m. in classroom #3 at the Naval Hospital (behind the Family Practice Clinic).

Classes scheduled for September include: Have Diabetes Will Travel on Sept. 6; Healthy Lifestyle on Sept. 13; Exercise and Diabetes on Sept. 20; and Healing Touch on Sept. 27.

Everyone is invited to these free classes. The staff looks forward to seeing you there. Bring along a spouse or friend. If you miss one class... don't worry these classes are on-going and at a future date will repeat.

For more information, call Charlotte Meinecke, R.N. at (619) 830-2218.

Marine Liaison

Continued from page 1.

Patient Administration would be very difficult indeed," said Lieutenant Ann Swap, Head Patient Administration Department. "The two men we have here in the office now are very good at what we ask them to do, they are very quick learners and very efficient, she added.

The Marine Liaison Office, a part of the Patient Administration Department here, has two Marines on loan as part of the Fleet Assistance Program (FAP). Sergeant Roy Whitener of Third Battalion, Seventh Marines and Lance Corporal Carl Lacy of First Battalion, Seven Marines.

"Basically our job is to track any Marine who comes to the hospital here for treatment and those who are sent out in town to a civilian doctor. We report back to the patient's command their condition and status," said Whitener.

Whitener, a Ventura, California native entered the Marines during the Gulf War. "I joined for the challenge and because of the Gulf War," said Whitener. After boot camp, Whitener attended training at MCT and SOI. Upon completing those schools he went to Barracks duty and in February of '92 he reported to 3/7 as a private first class. In August of '92 he was promoted to corporal and in February of '95 he was promoted to his current rank of sergeant.

"I think that this tour of duty with the hospital is good for me. I am learning how

to work with civilians and Navy personnel. I feel that this tour will help me with administrative type of work that I may have to do in the future," said Whitener.

The 30-year old Marine is the father of two, daughter Cassandra Marie, 6, and son Dylan Wayne, 22 months, and married for 7 years to Ashley Lynn.

Lance Corporal Carl Lacy, a native of Dallas, Texas has been in the Marine Corps for three years. His regular job... or MOS... is 0311, Infantry. About his job with the Navy... "I think in the Marine Corps you have to do what's expected, no questions asked, and do what you think and know is right and you won't have any problems," said Lacy.

Lacy is married to his high school sweetheart, Christy and they are the proud parents of a little boy, Justin who was born July 3 of this year.

OJT program



HN Gerald Young takes his job and training serious. He is headed for success.

Continued from page 1.

designated seaman heading for the fleet until he was selected to attend Hospital Corpsman A school. He has been at Naval Hospital Twentynine Palms for about 11 months and in the OJT program for about four months.

Others in the Radiology OJT program



HN Michelle Williams is another shining example of the quality Corpsmen in the training program at Naval Hospital Twentynine Palms.

are HM3 Jeffrey Russell, HM3 Anthony Davis, TAD from Second Division, Seventh Marines and has been in the program for about six months, and HN Shawn Sevy who has been in the Radiology OJT program for one year. Both Davis and Sevy are scheduled to start Advanced Xray Technician School in January.

Even if basic ASVAP scores aren't high enough the Education and Training Department of Naval Hospital Twentynine Palms has an educational program that will help young Corpsmen to study for and retake the ASVAP tests to increase their scores so they can qualify for advanced schools.

"Here at Naval Hospital Twentynine Palms there are many training opportunities to aid in advancing the careers of young Corpsmen... however it is up to individuals to take advantage of the training programs," said CDR Harris.



HM3 Nickie Torrance was given a fond farewell recently at Military Sick Call.



LCPL Carl Lacy is the second half of the Marine Liaison team at Naval Hospital Twentynine Palms.

TRICARE (CHAMPUS)

Trying to understand my medical benefits

For the Active Duty Families, Retirees, and their Families

If you are asking questions like the following, you need to contact your Health Benefits Advisor.

- Why didn't my medical bill get paid?
- Why was my account sent to a collection agency by my civilian provider?
- Am I on TRICARE PRIME or STANDARD and do I know the difference between the two?
- I am moving or going on vacation, what do I need to know about my medical benefits?

There are numerous other questions which you are asking or should be asking. You may be in the habit of asking a friend or neighbor what your medical benefits are, and by doing so, you may be doing yourself an injustice.

Ultimately, **You** are responsible for civilian medical bills. You are the one the civilian provider will take to collections, and may end up on a TRW report. It is **your** responsibility to know your benefits and what is required **before** you obtain civilian care.

Common Billing Problems

- DEERS -- Sometimes family members forget that their military ID card expired. No claims are processed if patients are not

enrolled in DEERS. Remember TRICARE is a military medical benefit, not an insurance. Dependent parents are not eligible under TRICARE for civilian health benefits.

- Sponsor's Social Security Number -- Sponsor's social security number **must** always be used when using TRICARE, not the patient's own social security number

Continued on page 8.

Examiner Want Ads

Ultimate desert residence. 1,900 sq. ft. 3 BR/3BA with fireplace, Jenn-Aire range, sunken family room. Beautifully landscaped with inground pool. Secluded on 2 1/2 acres. Dead-end road with magnificent view. For sale at \$127,500 (negotiable) or rent for \$950 per month. Call owner (Drs. Petre) at 367-2415 or Libby's Realty (Barbara Dunn) at 367-9521.

Bedroom set: King size bed, headboard, 2 nite stands and dresser for \$100. Call 367-7607 after 5 p.m.

Custom built home: 3 bedrooms, 2 bath, formal dining room, sunken living room, stone fireplace, tile floors, 2 covered patios, fenced, desert landscaping. Asking \$117,000 or will lease. Call (619) 367-5839 and ask for Larry or Judy.

For Sale or Lease: 3 bedroom, 1.5 bath home. 16X30 above ground pool, double carport, 1,803 sq. ft. Large fenced yard, 60' covered patio, landscaped. \$81,500 or \$685 per month lease (minimum 1 year). Call (619) 830-2189 for more information.

House for rent. Joshua Tree, Friendly Hills area, 3 bedrooms, 1 3/4 baths, fireplace, dishwasher, disposal, stove, laundry room, natural gas, large screened porch, large yard with trees and flowers, covered patio, fully fenced, new roof and swamp cooler. Cable ready. Available now. \$600 per month. Call (619) 366-8833.

Lovely House For Rent in Joshua Tree, 2,100 sq. ft., 2 bdrms, 1-3/4 bath, fireplace, planters and small pond in living room, kitchen with floor to ceiling ceramic tile, built-in refrigerator and built-in freezer, gas stove top, electric oven, dishwasher, disposal, walk-in pantry, separate dressing room, huge

den with bar, washer-dryer area, oversized double garage, block wall fence surrounding 2 level back yard, cable ready, swamp cooler and refrigerated air. Spotless. Available now. \$700. 366-8833.

1991 Yamaha VMAX 1200cc, 26,000 miles. \$4,000 OBO. Call Steve at 367-9263.

For Sale or Rent: 3 bedroom, 2 bath with above ground pool. 5629 Cahuilla. \$650 mo. rent, \$82,000 purchase. Call Marr Realty at 367-3568. Available Sept. 1.

Jacuzzi, ex. cond., 4 years old, electric, seats 6 - 8 people, \$2,500 OBO. Oak Dining Room Suit, Country style, includes large round table and 4 large high back chairs and large lighted hutch, like new, \$850 OBO. Call Donna ext 2430 or 367-9408 AWH.

1984 Mustang Convertible. 5.0 GTO High Performance (needs cosmetic attention) \$4,400 (Black with black top. This machine is seen in the hospital parking lot. Call Ruth at ext. 7544 or AWH at 369-1606.

Large newer home in Joshua Tree - Quail Spirngs Estate. Available for long term lease or lease with option to buy. 4 bedrooms, 2 baths, lrg. kitchen with walk-in pantry, walk-in closet in master bedroom, fantastic mountain/valley view. Nearly 1/2 acre lot, nice extra quiet neighborhood. Lease or lease option to buy is to be for no less than 24 months. \$950 per month with \$800 security deposit. No more than one dog and one cat, additional security deposit for pets is \$100 per animal. Please call/leave message at (619) 366-4738.

To find out how to get your ad listed here, call the Public Affairs Office at x2362.

TRICARE

Continued from page 4.

• A new option called "Point of Service" (POS) will be available to TRICARE Prime members. This option will allow members the freedom to obtain non-referred, non-emergency care from a network or non-network provider. However, POS will require a significantly higher cost share than the one required by TRICARE Standard. For example, POS carries an annual deductible of \$300 per individual or \$600 per family, and payment will be 50 percent of the CHAMPUS allowable charge.

For more information, call the Health Benefits Advisor at 830-2572.

Editor's Note: For related TRICARE information, see story above.

Insomnia – The 'Unwanted House Guest'

By Charlotte Meinecke, R.N.
Nurse Educator, Naval Hospital

Insomnia can be like the “unwanted house guest” that roams through your house all night, keeps you awake, and seemingly will never go away! Insomnia is not a disease, but is a continuing problem for as many as one in three adults every year and an occasional problem for everyone else in the United States. A person with insomnia frequently has trouble falling asleep or staying asleep. It can be short-term or long-term, depending on the cause. Insomnia can be like the “unwanted house guest” that roams through your house all night, keeps you awake, and seemingly will never

goes away.

For most people, occasional insomnia is a response to excitement. Both good and bad events in your life can keep you awake and thinking at night.

Disease is rarely the cause of insomnia. Common causes of insomnia include:

- Changes in sleep patterns because of different work hours, travel, or naps;
- Depression, anxiety, other behavior related problems;
- Use of caffeine and other stimulants;
- Alcohol, other depressants or sedatives, which can relax you, but lead to shallow, fragmented sleep; and
- Pain, shortness of breath, and other discomfort caused by illness

Insomnia can be a irritating during your “sleep time”, but is also a nuisance “the day after” leading to irritability, short attention span, and fatigue. Suggestions for approaching your insomnia are:

- Avoid alcohol, caffeine, big meals in the evening.
- Establish a regular bedtime, but don't go to bed if you feel wide awake.
- Use the bedroom for bedroom activities only. If the bedroom is used for paying bills, studying, etc., entering the bedroom can be a signal to become active rather than to sleep.
- Relax before going to bed. Reading, watching television, taking a bath, soothing music, or other activities to help your mind stop working overtime.
- Exercise regularly, but not in the last two hours before going to bed.
- Stop smoking. Smokers have more difficulty sleeping than non-smokers. Reminder: cutting back on smoking without quitting may lead to nicotine withdrawal during the night that awakens you.
- Use creative imagery and relaxation techniques. Counting sheep is one of the oldest examples of this. Concentrate on pleasant thoughts or scenes that relax you such as walking on a beach or in a field of flowers.
- Try to reduce stress in your life by changing things that cause it.
- Consider using “white noise”, such as a blowing fan
- Finally, many researchers believe that the most effective natural sleep inducer is--you guessed it--sex.
- “Sleeping pills” should be avoided.

If after the above actions your insomnia is “alive and well” and you are not “bright eyed and bushy tailed” in the morning, you may consider seeing your health care provider. After a physical exam, your provider may offer stress management, tests, or even sleep studies focusing on blood oxygen levels, heart rate, muscle tone and brain waves during sleep.

Insomnia can be a natural event in our busy lives. However, when prolonged or frequent insomnia can affect behavior or performance “the morning after”, both of you and your sleeping partner. Approach your insomnia as an “unwanted house guest” that has got to go!

Understanding medical benefits

Continued from page 7.

which is not recognized by DEERS. Improper social security numbers create billing problems.

Other considerations to be concerned about – but not the least

• **Catchment Area:** Whether or not you are residing in another state or city, you need to know if you fall under a military installation's Catchment Area. Catchment Area is based upon where you live, what zipcode you give as a mailing address. Some people assume they live too far away from a Military Treatment Center (MTF), then discover they reside within it's Catchment Area after it's too late.

• **Non-Availability Statements:** Non-emergent admission to a civilian facility for overnight or over 24 hour stay, and maternity care requires an Inpatient NAS. Some specific 14 outpatient surgical procedures require an Outpatient NAS. Routine outpatient care does not require an NAS. A NAS is an authorization issued by a Military Treatment Facility certifying that the type of health care service the patient needs is not available at the MTF. It is normally valid for hospital admission for the indicated procedure within 30 days of issuance. Issuing NASs is not automatic, it

requires prior approval. It is not a guarantee of payment. Other policies are taken into consideration, so unless you have a bonafide Life and Death Emergency as defined by OCHAMPUS, you need to check with the Health Benefits Office before having any surgery done or inpatient care.

• **Timely Filing of Claims:** Filling out CHAMPUS claim forms neatly and properly, submitting them in a timely manner and frequent follow-ups of the status with the CHAMPUS processor, will help in the expedition of processing your claims. Keep in touch with the billing departments of the providers who are involved in your care. Act on time always and don't wait for the deadline to file your CHAMPUS claims. For CHAMPUS filing deadline and where to send them, see your Health Benefit Advisor for assistance.

Remember: Health benefit policies are constantly changing. Your Health Benefits Advisors and Health Care Finders, are the **best source** of TRICARE information. Seek advice **before** you have civilian care, and don't depend on friends and neighbors for TRICARE information. For Health Benefits Advisors, contact Lin Harris or Bob Knight at (619) 830-2572. For Health Care Finders (TRICARE PRIME), contact Bob Pilgrim or Joy Heasley at (619) 830-7544 or after hours (800) 242-6788.

Healing Hearts support group offers help to grieving parents at 29 Palms

Remembering loss can be a devastating event especially when it occurs during pregnancy or after the birth of an infant.

There has been a total of 12 fetal and neonatal deaths at Naval Hospital Twentynine Palms over the past year; and about twenty percent of our pregnant population have experienced a single or multiple loss.

Lieutenant Melvern John, Assistant Division Officer of the Maternal Infant Ward, has seven years experience in Obstetrics and Maternal Child. Formally trained in bereavement, she will be coordinating a support group specific for these families and the people caring for them.

The support group will be affiliated with Healing Hearts.

Healing Hearts "a parent-to-parent support program for military families experiencing the loss of a fetus or infant" is an Armed Services YMCA program.

Although loss generally results from miscarriage, ectopic pregnancy, still-birth, prematurity, congenital disorders, birth trauma and SIDS (Sudden Infant Death Syndrome), it is not limited to these causes. Services will include a support group meeting on the second Tuesday of the month from 6 to 7 p.m., a quarterly newsletter, Healing Hearts volunteers, referral to individual support services when necessary, and annual resource patient and staff training.

The availability of the Healing Hearts program in this area will provide a "caring community" of individuals with similar experiences who will help each other resolve their loss and find new ways to deal with life positively.

For further information please contact Lt. John at 830-2258 or leave a message on the voice mail of Charlotte Meinecke, Patient Educator and Discharge Planner at 830-2218.

Reenlistments



MSC David Keown, Leading Chief Petty Officer of the Food Management Department takes the oath of reenlistment.



HM2 Jose Acosta of the Multiservice Ward takes the oath promising to serve and protect the Constitution of the United States.



BM2 Daren Moore of the hospital's Master at Arms Force also promises to serve a few more years.

Volunteer of the Quarter



Rhea Menke, a Red Cross Volunteer who donates her time to the patients on the Multiservice Ward, was selected as the hospital's Red Cross Volunteer of the Quarter. Congratulations Rhea!

Letters...

Optometry service was great

Optometry Clinic,

I extend my sincere appreciation for your medical support during our unit's last Annual Training.

On 16 July 1995, 13 members of our unit had essential eye examinations completed by your clinic. These eye exams resulted from two of your staff members untiring efforts to schedule them. Knowing our unit would return to Pennsylvania on 17 June 1995 and that their present duties restricted their appointments to a one day time frame, Lou Williams and Josepha Tajeron arranged the date and times accordingly. These eye exams were requested on short notice by our staff Corpsman, HM1 Valeski. Ms. Williams and Ms. Tajeron spent approximately two hours registering each of our member's patient information on the computer. For three days they tried to contact two previously scheduled patients so as to ensure all our members would be evaluated. Ms. Williams' and Ms. Tajeron's helpful attitude and true desire to facilitate our needs warrants recognition.

The obvious dedication of your staff contributed significantly to completing our unit's medical requirements. Ms. Williams' and Ms. Tajeron's personal initiative and professional competence are most appreciated.

**J. W. Lewis, Inspector-Instructor,
2nd Plt(REIN) Trk Co, Ebesburg, PA**

The best service in 28 years

To Who It May Concern,

My husband spent 33 years in the Marine Corps, I was with him 28 of those years.

In all the years I and my family have been treated by military hospitals, never have I received the loving, compassionate care as that I received at my recent visit to the Naval Hospital.

Indeed! Your emergency room and hospital care should be a model for all military hospitals.

**Thank you
Shirley Brown**

Food Management Department did a great job.

Dear Commanding Officer,

From 1 May 95 to 8 June 95, LCDR Paul R. Grasso, MSC David W. Keown and the staff of the Food Management Department of your command provided outstanding medical support to HN Borden, a member of our battalion who was assaulted and incurred a fractured jaw while providing assistance to another Marine. The willingness that your staff members displayed in ensuring that HN Borden received a liquid diet high in calories and nutrients demonstrates the Navy and Marine Corps are, indeed a team.

In particular MSC Keown and his crew provided three meals daily, including weekends and supplemental meals to HN Borden throughout this period. This extra effort and concern in spite of their heavy workload is sincerely appreciated.

You can be justifiably proud of the Food Management Department's professionalism and ability to live up to the phrase "Standing by to Assist." I extend to your and the Food Management Department my heartfelt appreciation and personal thanks for a job well done.

**J.E. Kruse Jr.
Commanding Officer
3d Battalion, 11th Marines**

Great Service

Dear Captain Chitwood,

During the past year I became pregnant and was followed throughout my pregnancy by the OB/GYN Department especially Dr. Brodnik. At 39 I was very concerned over my pregnancy and that of the fetus. Knowing my concerns Dr. Brodnik was always available to answer questions. He even planned to be there for me at delivery.

In late March I had three days of dysfunctional labor and after a couple of weeks of rest, finally really began labor on 14 April. Unfortunately again dysfunctional. The staff in Labor and Delivery that night were very helpful and supportive to my husband, CDR Brad Halverson, and I. They always made sure we were aware of staff changes. CDR Campy initially saw me and called Dr. Brodnik in. Finally, I had a C-section. The staff from anesthesi-

ology with pain control from beginning to arrival in the ward, always let me know they were there with me. Lt. Cary Ostergaard was wonderful to us and his care of my daughter very reassuring and competent.

I remained in the hospital for one week and would like to commend all the staff in the MIW, Lt. John was especially helpful. The staff from the Nursery assisted me so often and willingly as I needed to learn breast feeding and help my daughter along. HN Cavanaugh was also especially helpful and a bright spot each day.

I did not turn in my satisfaction survey when I left and have lost the names of some of the staff I wanted to commend to your. However, I was very impressed with all the officer, civilians and enlisted personnel from Labor and Delivery, Nursery, OR and MIW that were on duty the week of 14-21 April.

Please let them know for me again how much they made my stay worthwhile.

**Becky Sue Moore
CDR, DC, USN**

Greatful for fine staff

Dear Captain Chitwood,

On the 3rd of July 1995 as a Marine Reserve Captain attending Annual Training at MCAGCC, I was involved in a serious automobile accident while traveling from the EAF to the main side of the base. I was partially ejected from a van I was riding in and received numerous lacerations as well as my share of bumps and bruises. I am extremely fortunate to be alive and with out any serious injuries given the nature of the accident.

I would like to take this opportunity to thank you and your staff for the timely and precise medical care I was given while being attended to in your ER facility. My lacerations required some 200 plus sutures. Specifically, I'd like to extend my utmost thanks and appreciation to the ER Doctor, HN Joseph Heinzman, HN Phil Hirding and the ER Nurse who was on duty at the time (I apologize for not having his name readily available). HN's Heinsman and Hirding volunteered to stay on duty after already working a 12 hour plus shift and worked well into the night ensuring I received the proper care. They did an outstanding job "patching and sewing" me

Continued on next page.

Letters Continued...

Continued from previous page.

up. I have received numerous compliments by all medical personnel who have been involved in my recovery. Due to their diligence, professionalism and expertise my scarring is being held to a minimum and my recovery has been expeditious.

Please extend my sincere thanks to the entire staff that was on duty the night of 3 July. Their efforts and concern was of great comfort and a direct reflection on the pride and professionalism of the Navy Hospital Corps. Semper Paratus!

Sincerely,
Christopher A. Grenda

Happy occasion made more joyous

Dear Captain Chitwood:

Your hospital staff, as well as your hospital policy, made a happy occasion even more joyous.

My and I had the good fortune to be on hand for the birth of our first grandchild, Cader Locke, last month. We expected to sit nearby in the waiting room and get occasional updates. Instead, however, we were made to feel free to visit with our daughter and add our moral support to the proceedings. We saw our grandson only moments after he was born and it was a thrill we will long remember. Doctor Shuffer and Doctor Ostergaard could not have been more considerate and the nursing staff that evening showed all the care and concern one could ask for. The kindness and professionalism of all the staff speak very well for Navy medicine.

We feel fortunate that this happy event took place in your hospital and we thank you and the staff for providing us with a memorable experience.

Sincerely,
Lee Klug

ER Outstanding

Dear Sir:

My wife was admitted through the emergency room at your facility on Wednesday evening the 17th of May because she was having severe abdominal pain. We do not have a family physician in Twentynine Palms. Our home is in Los Alamos, NM and we usually spend a few

months each winter in your area.

After being examined by two Doctors in the emergency room a surgeon was called. He admitted my wife. On Thursday several diagnostic tests were made and nothing was found. A Doctor of Internal Medicine made a cursory examination and interviewed her. Her told the surgeon that admitted my wife that he thought she was "over medicated." The surgeon dismissed her as safe to travel to New Mexico to see her primary care physician.

One ultrasound test found a gall stone. She has been scheduled to have it removed using Laparoscopic Gallbladder Surgery.

I would like to have you inform the surgeon and more particularly the Doctor of Internal Medicine that diagnosed her as "over medicated" what they found.

We both appreciate the attention given to my wife during her period of discomfort. The entire staff in the emergency room, 3rd floor and the dietitian did everything they could do ease her pain. We were both thankful that your facility is there and was available to us when she needed it.

Respectfully,
Darrell Wl Sinclair

Positively impressed Captain Chitwood

My wife and I would like to thank those members of the hospital staff that assisted in the delivery of our child and the subsequent post operational care from 18 June to 21 June 1995.

We were positively impressed by the professionalism, courtesy, and individual attention demonstrated by all members of your team with which we came in contact.

Specifically we would like to recognize: Drs Shuffer and Ostergaard for their mastery of all things medical and encouraging bedside manners.

LTs (jg) Kristy Jones and Laura Roetner for their extensive knowledge of newborns and breastfeeding and their willingness to patiently pass on that knowledge to inexperienced parents. LT Jones guided me through the first hours of my daughter's life, for which I'll be eternally grateful.

HAs Barbier and Dougherty for their attentiveness and thoughtfulness. It is inspiring to see such confidence, know how and enthusiasm manifested in

hospitalmen so young. I think my wife thought they were interns.

Sir, I thought you might like to know how pleased my wife and I were with the care we experienced at the 29 Palms Naval Hospital. If there is any thing I can do to reciprocate--such as formalize this message into a letter please don't hesitate to ask.

Very Respectfully,
Brian Gudmundsson
CAPT USMC

Heartfelt Thanks

Captain Kozero,

I want to take this opportunity to express my heartfelt thanks for the many services I received during my hospital stays on 1-3 and 7-10 July 1995.

I delivered a healthy baby boy on 1 July 1995. It had been seven years since I previously gave birth, and I was amazed at the positive changes in protocol implemented at Naval Hospital Twentynine Palms! The nursing staff in both Labor and Delivery and Maternal Infant Ward were very helpful and sincere. I appreciated the communicativeness and professionalism of each staff member.

On 7 July 1995 I returned to the emergency room, and was later admitted to the Multiservice Ward. This was a difficult time for me because I wanted to be home with my newborn baby. I received excellent care during my entire stay. I especially want to thank GS-5 Schi for his attentiveness and for boosting my moral during my stay. Although I cannot remember every corpsman or nurse by name I am grateful for their care rendered.

Again, please extend my many thanks to all personnel involved. Although I do not look forward to being a patient again any time soon, my recent experience was a positive one!

Sincerely,
Claudia L. Acosta

Letter policy

Letters will be published on a first come first served basis. They should be typewritten, with the writer's full name. Letters should be brief to allow maximum participation by others. Letter writers should refrain from making personal attacks. Letters addressing specific problems pertaining to patient care can be addressed to the Patient Contact Representative or other appropriate hospital staff member for action to resolve the problem.

Naval Hospital Hardchargers...



Linda Jensen of the hospital's HRO office receives recognition from Capt. C.S. Chitwood, Commanding Officer.



Lieutenant Julie Milburn receives a Navy Achievement Medal from Capt. C.S. Chitwood, Commanding Officer.



BM2 Daren Moore receives recognition.

Ms. Susan Gagne receives special recognition from her last job in Indiana



Lieutenant Jennifer Myles receives a Letter of Commendation from Capt. C.S. Chitwood, Commanding Officer.



HM3 Jay Zulueta receives a Navy Good Conduct Medal from Capt. C.S. Chitwood, Commanding Officer.



Mrs. Teresa Somics and Commander Barbara Leary proudly display the cake specially made for their going away luncheon.



HN Tina Edstrom receives a Navy Good Conduct Medal from Capt. C.S. Chitwood, Commanding Officer.



Mrs. June Marie Larson receives a Letter of Appreciation from Capt. C.S. Chitwood, Commanding Officer.



Lieutenant Kathleen Duryea, MC, USNR, receives a Letter of Commendation from Capt. C.S. Chitwood, Commanding Officer.



Mr. Lou Grantham congratulates Mr. James Cox of housekeeping after receiving a Letter of Appreciation.